## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CRD-5052

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                 |                                       |                      |                                   | SM<br>TYI |             | TITY   | OR           |                    | R THAN<br>ENTITY                                 |
|---|--|---|---------------------------------|---------------------------------------|----------------------|-----------------------------------|-----------|-------------|--|--------------|--------------------|--|
| TOTAL CLAIMS  |  |   | 10                              |                                       | -                    |                                   |           | RATE        | FEE  | ٦            | RATE               | FEE  |
| FOR   |  |   | NUMBER FILED                    |                                       | NUMBER EXTRA         |                                   | ВА        | SIC FE      | E 385.00   | OR           | BASIC FE           | <del></del>                                      |
| TO  | OTAL CHARGE                                    | ABLE CLAIMS                                 | / O minus 20=                   |                                       | . 6                  |                                   | ×         | <br>(\$ 9=  |  | OR           | X\$18=             |  |
| INI   | DEPENDENT C                                    | CLAIMS                                      | 3 minus 3 = 1                   |                                       | * 6                  |                                   | -         | <br>(43=    | <del>                                     </del> | ┪            | X86=               | <del>                                     </del> |
| Мι  | JLTIPLE DEPE                                   | NDENT CLAIM P                               | RESENT                          |                                       |                      |                                   |           |             | <del>                                     </del> | OR           |                    |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                                 |                                       |                      |                                   | +         | 145=        |  | OR           | +290≃              |  |
|   |  |   |                                 |                                       |                      |                                   | T         | DTAL        |  | OR           | TOTAL              | 770  |
| CLAIMS AS AMENDED - PART (Column 1) (Column   |  |   |                                 |                                       |                      | (Column 3)                        | SM        | /ALL        | ENTITY   | OR           | OTHER<br>SMALL     |  |
|   |  | CLAIMS                                      | 1                               | HIGHE                                 |                      | (Coldinii 3)                      |           |             | ···  | <b>-</b> 0'' | OWALL              |  |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT             |                                 | NUMB<br>PREVIO<br>PAID F              | ER<br>USLY           | PRESENT<br>EXTRA                  | R         | ATE         | ADDI-<br>TIONAL<br>FEE                           |              | RATE               | ADDI-<br>TIONAL<br>FEE                           |
|   | Total  | *   | Minus                           | **                                    | _                    | = .                               | X         | 9=          |  | OR           | X\$18=             |  |
| AME   | Independent                                    | *   | Minus                           | ***                                   |                      | =                                 | X         | 43=         |  | OR           | X86=               |  |
| <u> </u>  | FIRST PRESE                                    | ENTATION OF MI                              | JLTIPLE DEI                     | PENDENT                               | CLAIM                |                                   |           | 45=         | <u> </u>   | 1            |                    |  |
|   |  |   |                                 |                                       |                      |                                   |           |             |  | OR           | +290=              |  |
|   |  |   |                                 |                                       | TOTAL<br>T. FEE      |                                   | JOR ,     | ADDIT. FEE  |  |              |                    |  |
|   |  | (Column 3)                                  |                                 |                                       |                      |                                   |           |             |  |              |                    |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                 | HIGHE<br>NUMB<br>PREVIOL<br>PAID F    | ER<br>JSLY           | PRESENT<br>EXTRA                  | RA        | TE'         | ADDI-<br>TIONAL<br>FEE                           |              | RATE               | ADDI-<br>TIONAL<br>FEE                           |
|   | Total  | *   | Minus                           | **                                    |                      | =                                 | X\$       | 9=          |  | OR           | X\$18=             |  |
|   | independent                                    | *   | Minus                           | ***                                   |                      | =                                 | X4        | 3=          |  | 1 t          | X86=               |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                 |                                       |                      |                                   |           |             |  | OR           | 7.00-              |  |
|   |  |   |                                 |                                       |                      |                                   | +14       |             | ·  | OR           | +290=              |  |
|   |  |   |                                 |                                       |                      |                                   |           | OTAL<br>FEE |  | OR A         | TOTAL<br>DDIT. FEE |  |
|   |  | (Column 1)                                  |                                 | (Columi                               | n 2)                 | (Column 3)                        |           |             |  |              |                    |  |
| MEN   |  | CLAIMS REMAINING AFTER AMENDMENT            |                                 | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | R                    | PRESENT<br>EXTRA                  | RA        | TE          | ADDI-<br>TIONAL<br>FEE                           |              | RATE               | ADDI-<br>TIONAL<br>FEE                           |
|   | Total  | *   | Minus                           | **                                    |                      | =                                 | X\$       | 9=          | 1 6.5  | OR           | X\$18=             | 7 5 5  |
|   | Independent                                    |   | Minus                           | ***                                   |                      | =                                 | X4:       |             |  |              |                    |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                 |                                       |                      |                                   |           | <u>'- l</u> |  | OR           | X86=               |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                                 |                                       |                      |                                   |           |             |  | OR           | +290=              |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                                 |                                       |                      |                                   |           |             |  | OR A         | TOTAL<br>DDIT, FEE | ·  |
| T   | he "Highest Num                                | mber Previously Paid<br>ber Previously Paid | u For IN THIS<br>For" (Total or | SPACE is li<br>Independent            | ess than i) is the I | 3, enter "3."<br>nighest number f |           |             | ropriate box                                     |              |                    |  |